

**VISITOR TRANSPORTATION SYSTEMS (VTS)
SURFACE TRANSPORTATION SURVEY FORM**

Name of NPS Unit: _____

Name of VTS: _____

Respondent's Name: _____

Respondent's Title: _____ Date: _____

Respondent's Phone: _____ Fax: _____ E-Mail: _____

Section 1: How is the VTS Service Provided?

1.1 In what year was the VTS service first provided: _____

1.2 Who currently manages the VTS service? _____

1.3 Who currently operates the VTS service? ☐ National Park Service employees
☐ Other employees* _____*If you answered "Other Employees", go to Question 1.4. Otherwise, skip to Question 1.7.*1.4 What is your relationship to the other employees: ☐ Contractual ☐ Concession ☐ Other* _____

1.5 What is the name, address and telephone number of the Contractor/Concessioner? _____

1.6 What is the term of the current agreement or contract? ____
What date did it start? _____ What date does it expire? _____

1.7 Enclose a copy of the current agreement under which the VTS is operated.

1.8 Provide the personnel data requested in Table A (if you need more space, use additional sheets).

Section 2: What Kind of VTS Service is Provided?

2.1 What type of vehicles is used to operate the VTS service? (See the survey glossary for specific definitions.)

☐ Conventional Bus ☐ Open Bus ("Trolley") ☐ Tram ☐ Small Bus ☐ Van ☐ Electric Trolley ☐ Train☐ Other* _____2.2 Does the VTS service always operate along a fixed route (or routes)? Yes ☐ No ☐*If you answered "Yes" go to Question 2.3. If you answered "No" skip to Question 2.4.*

2.3 What are the designation and round trip mileage for each fixed route?

	Route Name, Number or Designation	Round Trip Mileage
1		
2		
3		
4		

If you need more space, use additional sheets. Skip to Question 2.5.

2.4 If the VTS does not always follow a fixed route, how is the path it takes determined?

☐ Passenger Demand* (describe how demand is determined) ☐ Reservations* (describe reservation system)or ☐ Other* _____

2.5 Enclose maps and other materials that show the routings and/or the areas where the VTS services operate.

Section 3: What is the Functional Purpose of the VTS Service?

3.1 Is the VTS the sole means of public access into the park or park unit (other than walk, bicycle or horseback)?

☐ Yes ☐ No

3.2 Rate each of the following attributes as to their degree of relevance to the VTS service?

Please check high, medium or low for each attribute:	High	Medium	Low	Does Not Apply
Visitor Enhancement. The VTS enhances the visitor's experience by offering interpretive opportunities, simplifying travel within the park or making it easier to see park features.				
Resource Protection. The VTS reduces traffic congestion, noise, air pollution and adverse effects on park resources and values.				
Cost Effectiveness. The VTS is a cost-effective alternative to the construction of additional roads, parking and support facilities.				
Sustainability. The VTS conserves energy and provides more sustainability for the park or park unit.				

3.3 Which of the above attributes most nearly describes the primary purpose of the VTS? (Check one.)

☐ Visitor Enhancement ☐ Resource Protection ☐ Cost-Effectiveness ☐ Sustainability

Section 4: When Does the VTS Service Operate?

4.1 Does VTS service operate year round? ☐ Yes ☐ No* (If "No" provide start & end dates for the following years)

In FY1996: _____ In FY1997: _____

4.2 Between what dates in 1996 was demand for service at its highest? _____

At its lowest? (Ignore periods when VTS does not operate.) _____

Section 5: How Often Does the VTS Service Operate?

5.1 Does the VTS operate on a fixed schedule? ☐ Yes ☐ No* (If "No" describe how trip times are determined.)

5.2 Is the level of service modified during the course of the week in response to passenger demand? ☐ No

☐ Yes* (If "Yes" indicate which days are busiest.) _____

5.3 Is the level of service modified during the course of the day in response to passenger demand, regardless of a fixed schedule (if there is one)? ☐ No ☐ Yes* (If "Yes" describe the procedure for modifying service.)

5.4 Is a VTS schedule provided to vehicle operators? ☐ Yes ☐ No* (If "No" describe how trips are dispatched.)

5.5 Is a VTS schedule available to park visitors? ☐ Yes ☐ No* (If "No" describe how visitors learn trip times.)

5.6 Provide the 1996 service frequency data requested in Table B (if you need more space, use additional sheets).

5.7 Enclose with this survey any printed materials available to operators and visitors concerning the frequency and schedule of VTS services (including brochures, timetables, operator instructions, schedules, etc.)

Section 6: What is the VTS Rolling Stock?

6.1 Who provides the vehicles/rolling stock operated in VTS service?

- ☐ Owned by National Park Service ☐ Leased by National Park Service
☐ Owned by Contractor/Concessioner[†] ☐ Leased by Contractor/Concessioner[†]
☐ Other* _____

[†] Referring to the Contractor/Concessioner named in 1.5, above

6.2 What is the total number of vehicles in the VTS fleet? _____

6.3 What is the greatest number of vehicles operated in service at a single time? _____

6.4 Do any vehicles employ alternative fuels? ☐ No ☐ Yes* (If "Yes" describe alternative fuels used.)

- ☐ Electric ☐ Liquefied Natural Gas (LNG) ☐ Compressed Natural Gas (CNG) ☐ Propane (LPG)
☐ Other* _____

6.5 Provide the rolling stock data requested in Table C for each vehicle associated with the VTS service (if you need more space, use additional sheets).

Section 7: What Facilities Does the VTS Use?

7.1 Is there an inventory of VTS facilities (such as garages, maintenance facilities, stations, shelters, signs, ticket booths, offices, etc.)? ☐ No ☐ Yes* (If "Yes" enclose a copy of the inventory with this survey.)

7.2 For the most part, who owns the VTS facilities?

- ☐ Wholly owned by National Park Service ☐ National Park Service possesses a partial interest
☐ Wholly owned by Contractor/Concessioner[†] ☐ Contractor/Concessioner[†] possesses a partial interest
☐ Other* _____

[†] Referring to the Contractor/Concessioner named in 1.5, above

7.3 Provide the facility data requested in Table D for each major facility associated with the VTS service (garage, maintenance facilities, stations, etc.).

Section 8: Who Uses the VTS Services?

8.1 Are regular counts kept of the number of visitors using the VTS service? ☐ No ☐ Yes* (If "Yes" describe how often counts are made). _____

8.2 If available, please provide the average daily number of passenger boardings, by peak and non-peak season, and the total number of passengers using the system, for each of the last five fiscal years.

	Average Daily Passenger Boardings (Peak Season)	Average Daily Passenger Boardings (Non-Peak Season)	Total Annual Passenger Boardings
FY96			
FY95			
FY94			
FY93			
FY92			

8.3 Enclose with this survey any existing reports or memoranda that summarize FY96 and/or FY97 ridership in greater detail.

Section 9: What is the VTS System Performance

- 9.1 During the peak travel season when passenger loads are the highest, what is the approximate percentage of the VTS trips in which (1) vehicles are filled to capacity, (2) vehicles are filled beyond capacity and riders are left behind at boarding areas, and (3) operate on-time (within five-minutes of scheduled time for those systems utilizing a fixed schedule).

	Route Name, Number or Designation	Percent Peak Season Trips in Which:		
		Vehicles Filled to Capacity	Riders Can Not Board	Operate On-Time
1				
2				
3				
4				

- 9.2 Has the VTS service ever failed to operate a scheduled trip due to a shortage of operable rolling stock? ☐ No
☐ Yes* (If "Yes" indicate how often this has happened.) _____
- 9.3 Has the VTS service ever failed to operate a scheduled trip due to shortage of or missing drivers? ☐ No
☐ Yes* (If "Yes" indicate how often this has happened.) _____

Section 10: How Much is Charged for Using the VTS Service?

- 10.1 Is a fare charged to use the VTS service? ☐ Yes ☐ No (If "No" skip to Section 11.)
- 10.2 Does the fare charged vary according to season, day of week, or time of year? ☐ Yes ☐ No
- 10.3 Does fares vary between adults and children? ☐ Yes ☐ No
- 10.4 Provide the fares for the VTS service in each applicable category below.

Peak Season				Off Season			
Peak Day		Off Peak Day		Peak Day		Off Peak Day	
Adults	Children	Adults	Children	Adults	Children	Adults	Children

- 10.5 How much fare revenue was collected in each of the past five fiscal years?

Year:	FY1996	FY1995	FY1994	FY1993	FY1992
Amount:					

Section 11: What are the Operating Costs for the VTS Service?

- 11.1 What were the total annual cost of operating the VTS service for each of the past five fiscal years?
(If contractor/Concessioner operated, report separately any fees paid to NPS or the Treasury.)

Year:	FY1996	FY1995	FY1994	FY1993	FY1992
Amount:					
Fees:					

- 11.2 Does the NPS financially support the VTS in any way? ☐ Yes* ☐ No (If "Yes" indicate below the annual amount of support payments received from NPS for the past five fiscal years.)

Year:	FY1996	FY1995	FY1994	FY1993	FY1992
Amount:					

11.3 Does the NPS or Treasury receive payments from the VTS Contractor/Concessioner? ☐ Yes* ☐ No
(If "Yes" indicate the basis upon which they are determined and the amount for the past five fiscal years).

☐ Flat Fee

☐ Percent of Gross Revenues (define current percentage) _____ %

☐ Other* _____

Year:	FY1996	FY1995	FY1994	FY1993	FY1992
Amount:					

11.4 Does the VTS service receive funds from sources other than NPS (grants, donations, etc.)? ☐ No ☐ Yes*
(If "Yes" indicate below the annual amount of payments received by source for the past five fiscal years. If more than three sources, use additional sheets.)

	Funding Source	1996	1995	1994	1993	1992
Source 1						
Source 2						
Source 3						

Section 12: What are the VTS Liability and Safety Programs?

12.1 What liability levels of insurance and at what premium payment did the VTS operator carry on operations in 1996, and what is the premium cost for each item?

	Coverage Level (in thousands)	Amount of Premium (in dollars)
Collision	\$	\$
Comprehensive	\$	\$
Property Liability	\$	\$
Personal Injury Liability	\$	\$
Medical Liability	\$	\$
Other (describe)	\$	\$

12.2 Who pays for the Insurance? ☐ NPS ☐ Contractor/Concessioner ☐ Other* _____

12.3 Are the individual VTS drivers required to provide their own insurance?

☐ Yes ☐ No* (If "No" indicate who pays.) _____

12.4 Are the individual VTS drivers required to hold a Commercial Driver's License?

☐ No ☐ Yes* (If "Yes" indicate who pays for drivers to obtain a CDL.) _____

12.4 Is the driving history of new employees screened before hiring?

☐ No ☐ Yes* (If "Yes" indicate who conducts the screening.) _____

12.5 Is substance abuse screening required of new employees prior to hiring?

☐ No ☐ Yes* (If "Yes" indicate who conducts the screening.) _____

12.6 Is there a special driving or safety training program for new employees?

☐ No ☐ Yes* (If "Yes" indicate who conducts the training.) _____

12.7 Is there a program to identify and discipline drivers who commit substance abuse offenses after hiring?

☐ No ☐ Yes* (If "Yes" indicate who maintains the program.) _____

☐ No ☐ Yes* (If "Yes" indicate how many.) _____

13.1 Is there a written maintenance program for the VTS vehicles? ☐ No ☐ Yes

13.2 Are there written procedures for the management of hazardous wastes? ☐ No ☐ Yes

13.3 Is there a written training program for VTS vehicle maintainers? ☐ No ☐ Yes

13.4 Is there a written safety program for VTS vehicle maintainers? ☐ No ☐ Yes

(If "Yes" was indicated for any of the above, please enclose a copy of the program/procedure with the survey.)

13.5 Are the maintainers required to be certified before working on Air Conditioning or Brake Systems? ☐ No
☐ Yes* *(If "Yes" indicate who pays for certification.)* _____

13.6 Are records required by OSHA and other Federal Agencies concerning hazards in the work place regularly maintained or, in the case of contractor/Concessioner, inspected by NPS personnel? ☐ No ☐ Yes

13.7 What is the number of vehicles held out of service on a typical day during the peak visitor season for maintenance (routine or otherwise)? _____

13.8 What is the number of preventable maintenance road calls made during FY1996: _____

[illegible]

Table B
1996 VTS SERVICE FREQUENCIES

For the VTS service, provide the typical number of vehicle trips operated per day on each particular route, during the 1996 peak and off-peak visitor seasons. Please attach operator schedules for peak and off-peak season services, if available.

Name of NPS Unit: _____ Name of VTS: _____

	Number of Trips Operated per Day PEAK SEASON						
	Mon	Tue	Wed	Thurs	Fri	Sat	Sun
Route:							
Route:							
Route:							
Route:							
Route:							
Route:							
Route:							
Route:							
Route:							
Route:							
Route:							
Route:							

OFF-PEAK SEASON						
Mon	Tue	Wed	Thurs	Fri	Sat	Sun

Table A
1996 VTS OPERATING PERSONNEL

Provide the following information concerning the personnel who are engaged in the operation of VTS services. If information is available, differentiate between year-round (or longer-term) positions filled throughout FY1996s versus seasonal positions that were filled only during the peak visitor season. For positions where employees are only partially engaged in supporting the VTS service, specify a reasonable approximation of the percentage of time an employee was engaged in VTS service. If more room is need, use additional sheets.

Name of NPS Unit: _____ Name of VTS: _____

Position/Type (Provide Titles and/or Grades)	YEAR-ROUND POSITIONS						SEASONAL POSITIONS					
	Full-Time			Part-Time			Full-Time			Part-Time		
	Number	Average Hourly Wage (incl. fringe)	Percent Time In VTS Service	Number	Average Hourly Wage (incl. fringe)	Percent Time In VTS Service	Number	Average Hourly Wage (incl. fringe)	Percent Time In VTS Service	Number	Average Hourly Wage (incl. fringe)	Percent Time In VTS Service
		\$	%		\$	%		\$	%		\$	%
		\$	%		\$	%		\$	%		\$	%
		\$	%		\$	%		\$	%		\$	%
		\$	%		\$	%		\$	%		\$	%
		\$	%		\$	%		\$	%		\$	%
		\$	%		\$	%		\$	%		\$	%
		\$	%		\$	%		\$	%		\$	%
		\$	%		\$	%		\$	%		\$	%
		\$	%		\$	%		\$	%		\$	%
		\$	%		\$	%		\$	%		\$	%
		\$	%		\$	%		\$	%		\$	%
		\$	%		\$	%		\$	%		\$	%
		\$	%		\$	%		\$	%		\$	%
		\$	%		\$	%		\$	%		\$	%

Table C
VTS ROLLING STOCK

Provide the following information concerning each unit/vehicle used to carry passengers in VTS service. If more room is needed, use additional sheets.

Name of NPS Unit: _____ Name of VTS: _____

Vehicle/Unit Make	Vehicle/Unit Model	Model Year	Type of Fuel	Miles Operated in 1996	Estimated Condition (circle one) (1 = highest)	Capacity (seated/standing)	Unit/Vehicle Ownership (check one)	Who Owns or Leases?	Who Maintains?
					1 2 3 4 5	/	<input type="checkbox"/> Owned <input type="checkbox"/> Leased		
					1 2 3 4 5	/	<input type="checkbox"/> Owned <input type="checkbox"/> Leased		
					1 2 3 4 5	/	<input type="checkbox"/> Owned <input type="checkbox"/> Leased		
					1 2 3 4 5	/	<input type="checkbox"/> Owned <input type="checkbox"/> Leased		
					1 2 3 4 5	/	<input type="checkbox"/> Owned <input type="checkbox"/> Leased		
					1 2 3 4 5	/	<input type="checkbox"/> Owned <input type="checkbox"/> Leased		
					1 2 3 4 5	/	<input type="checkbox"/> Owned <input type="checkbox"/> Leased		
					1 2 3 4 5	/	<input type="checkbox"/> Owned <input type="checkbox"/> Leased		
					1 2 3 4 5	/	<input type="checkbox"/> Owned <input type="checkbox"/> Leased		
					1 2 3 4 5	/	<input type="checkbox"/> Owned <input type="checkbox"/> Leased		
					1 2 3 4 5	/	<input type="checkbox"/> Owned <input type="checkbox"/> Leased		
					1 2 3 4 5	/	<input type="checkbox"/> Owned <input type="checkbox"/> Leased		
					1 2 3 4 5	/	<input type="checkbox"/> Owned <input type="checkbox"/> Leased		
					1 2 3 4 5	/	<input type="checkbox"/> Owned <input type="checkbox"/> Leased		
					1 2 3 4 5	/	<input type="checkbox"/> Owned <input type="checkbox"/> Leased		
					1 2 3 4 5	/	<input type="checkbox"/> Owned <input type="checkbox"/> Leased		

Table D
VTS FIXED FACILITIES

Provide the following information concerning the fixed facilities (e.g.: passenger shelters, garages, maintenance facilities, offices) used to provide the VTS services. If more room is need, use additional sheets.

Name of NPS Unit: _____ Name of VTS: _____

Facility Description	Year Built	Who Owns the Facility? (check one)	Who Maintains the Facility?	Estimated 1996 Maintenance Costs	Estimated Condition (Circle One) (1 = highest)
		<input type="checkbox"/> NPS <input type="checkbox"/> Contractor/Concessioner <input type="checkbox"/> Other <input type="checkbox"/> Joint Ownership (NPS & Contractor/Conces'er)		\$	1 2 3 4 5
		<input type="checkbox"/> NPS <input type="checkbox"/> Contractor/Concessioner <input type="checkbox"/> Other <input type="checkbox"/> Joint Ownership (NPS & Contractor/Conces'er)		\$	1 2 3 4 5
		<input type="checkbox"/> NPS <input type="checkbox"/> Contractor/Concessioner <input type="checkbox"/> Other <input type="checkbox"/> Joint Ownership (NPS & Contractor/Conces'er)		\$	1 2 3 4 5
		<input type="checkbox"/> NPS <input type="checkbox"/> Contractor/Concessioner <input type="checkbox"/> Other <input type="checkbox"/> Joint Ownership (NPS & Contractor/Conces'er)		\$	1 2 3 4 5
		<input type="checkbox"/> NPS <input type="checkbox"/> Contractor/Concessioner <input type="checkbox"/> Other <input type="checkbox"/> Joint Ownership (NPS & Contractor/Conces'er)		\$	1 2 3 4 5
		<input type="checkbox"/> NPS <input type="checkbox"/> Contractor/Concessioner <input type="checkbox"/> Other <input type="checkbox"/> Joint Ownership (NPS & Contractor/Conces'er)		\$	1 2 3 4 5
		<input type="checkbox"/> NPS <input type="checkbox"/> Contractor/Concessioner <input type="checkbox"/> Other <input type="checkbox"/> Joint Ownership (NPS & Contractor/Conces'er)		\$	1 2 3 4 5

Inventory and Assessment of National Park Service Visitor Transportation Systems
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		<input type="checkbox"/> NPS <input type="checkbox"/> Contractor/Concessioner <input type="checkbox"/> Other <input type="checkbox"/> Joint Ownership (NPS & Contractor/Conces'er)		\$	1 2 3 4 5
		<input type="checkbox"/> NPS <input type="checkbox"/> Contractor/Concessioner <input type="checkbox"/> Other <input type="checkbox"/> Joint Ownership (NPS & Contractor/Conces'er)		\$	1 2 3 4 5
		<input type="checkbox"/> NPS <input type="checkbox"/> Contractor/Concessioner <input type="checkbox"/> Other <input type="checkbox"/> Joint Ownership (NPS & Contractor/Conces'er)		\$	1 2 3 4 5
		<input type="checkbox"/> NPS <input type="checkbox"/> Contractor/Concessioner <input type="checkbox"/> Other <input type="checkbox"/> Joint Ownership (NPS & Contractor/Conces'er)		\$	1 2 3 4 5
		<input type="checkbox"/> NPS <input type="checkbox"/> Contractor/Concessioner <input type="checkbox"/> Other <input type="checkbox"/> Joint Ownership (NPS & Contractor/Conces'er)		\$	1 2 3 4 5
		<input type="checkbox"/> NPS <input type="checkbox"/> Contractor/Concessioner <input type="checkbox"/> Other <input type="checkbox"/> Joint Ownership (NPS & Contractor/Conces'er)		\$	1 2 3 4 5
		<input type="checkbox"/> NPS <input type="checkbox"/> Contractor/Concessioner <input type="checkbox"/> Other <input type="checkbox"/> Joint Ownership (NPS & Contractor/Conces'er)		\$	1 2 3 4 5